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CENTRAL FAX CENTER****MAY 06 2005****DATE:** May 6, 2005**PTO IDENTIFIER:** Application Number 09/733,752-Conf. #4800
Patent Number**Inventor:** Gaines W. Hammond et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** EDWARDS & ANGELL, LLP

Robert J. Tosti

PHONE: (617) 517-5584**Attorney Dkt. #:** 62898(71589)**PAGES (Including Cover Sheet):** 4**CONTENTS:** Statement Under 37 CFR 3.73(b) (1 page)
Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence
Address (1 page)
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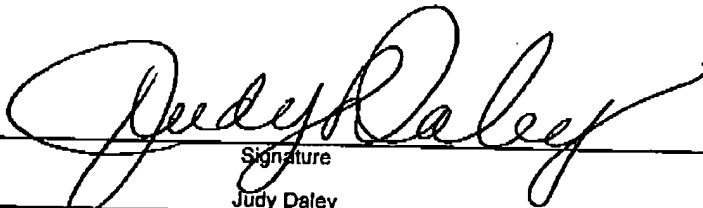
Application No. (if known): 09/733,752

Attorney Docket No.: 62898(71589)

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Statement Under 37 CFR 3.73(b) (1 page)
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REVOCAION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/733,752-Conf. #4800		
	Filing Date	December 8, 2000		
	First Named Inventor	Gaines W. Hammond		
	Art Unit	3738		
	Examiner Name	B. E. Pellegrino		
	Attorney Docket Number	62898(71589)		

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
OR
☒ I hereby appoint the practitioners associated with the Customer Number: 21874

☒ Please change the correspondence address for the above-identified application to:
☒ The address associated with Customer Number: 21874
OR

☐ Firm or Individual Name **EDWARDS & ANGELL, LLP**
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I am the:

☐ Applicant/Inventor.
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature 

Name **Jerry E. Mann**

Date **5/3/05** Telephone **508/652-5955**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Galnes W. Hammond et al.

Application No./Patent No.: 09/733,752 Filed/Issue Date: December 8, 2000

Entitled: FACILITATING DRAINAGE
Boston Scientific Scimed, Inc.
(Exe. Scimed Life Systems, Inc.), a Corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or

2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %
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A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 011539, Frame 0064, or for which a copy thereof is attached.

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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Jeff. Z Mann Signature
Printed or Typed Name
Assistant Secretary Title

5/3/05 Date
508/652-6955 Telephone Number

456140